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PTO/SB/62 (05-03)

Approved for use through 01/21/2004. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Docket Number (optional)

3058-1000-024

REISSUE APPLICATION DECLARATION BY THE ASSIGNEE

I hereby declare that:

The residence, mailing address and citizenship of the inventors are stated below.

Aura Communications, Inc.

I am authorized to act on behalf of the following assignee:

Chief Operating Officer

and the title of my position with said assignee is:

The entire use to the patent identified below is vested in said assignee.

Inventor	Citizenship
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Vincent Palermo	USA
-----------------	-----

Residence/Mailing Address	
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13 Stony Brook Road, Westford, MA 01886	Citizenship
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Inventor	USA
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Patrick J. Cobler	USA
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Residence/Mailing Address	
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26 Cherry Hollow Road, Nashua, NH 03062	Citizenship
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<input checked="" type="checkbox"/> Additional inventors are named on separately numbered sheets attached hereto.	Date of Patent Issued
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Patent Number	November 9, 1999
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5,982,764

Title of Invention	
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Time-Multiplexed Short-Range Magnetic Communications

I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:

Time-Multiplexed Short-Range Magnetic Communications

the specification of which

is attached hereto.

was filed on November 6, 2001 as reissue application number 09/1993,328

and was amended on _____ (If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby believe the original patent to be wholly or partly inoperable or invalid, for the reasons described below. (Check all boxes that apply.)

by reason of a defective specification or drawing.

by reason of the patentee claiming more or less than he had the right to claim in the patent.

by reason of other errors.

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This collection of information is required by 37 CFR 1.76. The information is required to support or relate a benefit by the public which is to be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.16. The collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. This will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, showing as best as possible the nature of the burden, may be sent to the Chief Information Officer: U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 7-800-PTO-9798 and select option 2.

PTO/SB/52 (08-03)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Docket Number (Optional)

3058.1000-024

REISSUE APPLICATION DECLARATION BY THE ASSIGNEE

At least one error upon which reissue 13 02580 is described as follows:
 The broadening reissue application is filed in view of the error of not prosecuting method claims in the original application 08/841,502. Method claims 5-30 and 31-56 have been added. System claims 57-81 and 82-106 have also been added to correct the error of overly narrow system claims 1-4 of the original application.

(Attach additional sheets, if needed)

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Registration Number

Name(s)

Correspondence Address: Direct all communications about the application to:

 Customer Number

21005

Type Customer Number Here

Place Customer
Number Bar Code
Label Here

OR

 Firm or
Individual
Name

Address

Address

City

Country

Telephone

State

Zip

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of person signing (given name, family name)

Charles M. Marshall

Signature

Date

July 21, 2003

Address of Assignee

Aura Communications, Inc.
187 Ballardvale Street, Wilmington, MA 01887

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Reissue application declaration by the assignee
3058.1000-024
page 1A

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Acton, MA 01720

Citizenship: USA